

County: Winnebago  
 PEABODY MANOR  
 2500 SOUTH HERITAGE WOODS DRIVE  
 APPLETON 54915 Phone: (920) 733-3724  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/01): 58  
 Total Licensed Bed Capacity (12/31/01): 58  
 Number of Residents on 12/31/01: 56

Facility ID: 7330

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Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? Yes  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 50

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		37.5
Supp. Home Care-Personal Care	No					1 - 4 Years		35.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.1	More Than 4 Years		26.8
Day Services	No	Mental Illness (Org./Psy)	19.6	65 - 74	5.4			-----
Respite Care	No	Mental Illness (Other)	1.8	75 - 84	10.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	42.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	33.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.6		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	12.5		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	17.9	65 & Over	92.9	-----		
Transportation	No	Cerebrovascular	17.9		-----	RNs		17.1
Referral Service	No	Diabetes	1.8	Sex	%	LPNs		8.3
Other Services	Yes	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	25.0	Male	21.4	Aides, & Orderlies		
Mentally Ill	No		-----	Female	78.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	8	100.0	295	18	78.3	95	0	0.0	0	22	100.0	158	0	0.0	0	3	100.0	189	51	91.1
Intermediate	---	---	---	5	21.7	79	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	8.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		23	100.0		0	0.0		22	100.0		0	0.0		3	100.0		56	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
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Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	3.3	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	23.9	Bathing	0.0	83.9	16.1	56
Other Nursing Homes	7.6	Dressing	12.5	71.4	16.1	56
Acute Care Hospitals	57.6	Transferring	25.0	58.9	16.1	56
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	19.6	64.3	16.1	56
Rehabilitation Hospitals	0.0	Eating	53.6	37.5	8.9	56
Other Locations	7.6	*****				
Total Number of Admissions	92	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	3.6	Receiving Respiratory Care		3.6
Private Home/No Home Health	20.0	Occ/Freq. Incontinent of Bladder	55.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	2.4	Occ/Freq. Incontinent of Bowel	26.8	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		3.6
Acute Care Hospitals	8.2	Mobility		Receiving Tube Feeding		1.8
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	3.6	Receiving Mechanically Altered Diets		21.4
Rehabilitation Hospitals	0.0					
Other Locations	11.8	Skin Care		Other Resident Characteristics		
Deaths	57.6	With Pressure Sores	8.9	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	3.6	Medications		
(Including Deaths)	85			Receiving Psychoactive Drugs		37.5

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Nonprofit Peer Group Ratio % Ratio	Bed Size: 50-99 Peer Group Ratio % Ratio	Licensure: Skilled Peer Group Ratio % Ratio	All Facilities % Ratio				
Occupancy Rate: Average Daily Census/Licensed Beds	88.2	89.4	0.99	85.1	1.04	84.3	1.05	84.6	1.04
Current Residents from In-County	21.4	82.7	0.26	80.0	0.27	82.7	0.26	77.0	0.28
Admissions from In-County, Still Residing	6.5	25.4	0.26	20.9	0.31	21.6	0.30	20.8	0.31
Admissions/Average Daily Census	184.0	117.0	1.57	144.6	1.27	137.9	1.33	128.9	1.43
Discharges/Average Daily Census	170.0	116.8	1.46	144.8	1.17	139.0	1.22	130.0	1.31
Discharges To Private Residence/Average Daily Census	38.0	42.1	0.90	60.4	0.63	55.2	0.69	52.8	0.72
Residents Receiving Skilled Care	91.1	93.4	0.98	90.5	1.01	91.8	0.99	85.3	1.07
Residents Aged 65 and Older	92.9	96.2	0.96	94.7	0.98	92.5	1.00	87.5	1.06
Title 19 (Medicaid) Funded Residents	41.1	57.0	0.72	58.0	0.71	64.3	0.64	68.7	0.60
Private Pay Funded Residents	39.3	35.6	1.10	32.0	1.23	25.6	1.54	22.0	1.79
Developmentally Disabled Residents	0.0	0.6	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	21.4	37.4	0.57	33.8	0.63	37.4	0.57	33.8	0.63
General Medical Service Residents	25.0	21.4	1.17	18.3	1.36	21.2	1.18	19.4	1.29
Impaired ADL (Mean)	46.8	51.7	0.90	48.1	0.97	49.6	0.94	49.3	0.95
Psychological Problems	37.5	52.8	0.71	51.0	0.74	54.1	0.69	51.9	0.72
Nursing Care Required (Mean)	5.4	6.4	0.84	6.0	0.89	6.5	0.82	7.3	0.73